



STATE OF MISSOURI
DEPARTMENT OF INSURANCE
GENERAL BAIL BOND AFFIDAVIT

P.O. BOX 690
JEFFERSON CITY, MO 65102-0690
TELEPHONE: (573) 751-3518

Note: Pursuant to Section 374.760 RSMo, an affidavit shall be filed with the Missouri Department of Insurance between the FIRST and the TENTH day of each month by every general bail bond agent.

NAME OF GENERAL BAIL BOND AGENT

I, _____, being first duly sworn, on my oath state:

That I am a general bail bond agent duly licensed under the provisions of sections 374.695 to 374.789 RSMo;

☐ That there are no unsatisfied judgements against me;

☐ That there are unsatisfied judgements against me;

Case # _____ County _____ Amount _____ Date of Judgement _____

Case # _____ County _____ Amount _____ Date of Judgement _____

(Include all unsatisfied judgements, attach additional sheets as needed.)

That this affidavit is made pursuant to and in compliance with Section 374.760 RSMo.

MUST BE SIGNED IN PRESENCE OF NOTARY PUBLIC

SIGNATURE



GB LICENSE NO:

NOTARY PUBLIC INFORMATION

NOTARY PUBLIC EMBOSSEER SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)	
	SUBSCRIBED AND SWORN BEFORE ME, THIS DAY OF YEAR		
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES	USE RUBBER STAMP IN CLEAR AREA BELOW
	NOTARY PUBLIC NAME (TYPED OR PRINTED)		